BEST AVAILABLE CUPIL 55372 OMB Number 3235-0076 FORM D Expires: May 31, 2005 ECURITIES AND EXCHANGE COMMISSION Estimated average burden Washington, D.C. 20549 RECEIVED hours per response...... 16.00 FORM D OXICE OF SALE OF SECURITIES SEC USE ONLY PÚRSUANT TO REGULATION D, Prefix SECTION 4(6), AND/OR DATE RECEIVED 20**2)APPORM LIMITED OFFERING EXEMPTION** Name of Offering if his is an amendment and name has changed, and indicate change.) Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer ( check if this is an amendment and name has changed, and indicate change.) Itec Enviornmental Group, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 693 Hi Tech Parkway, Oakdale, CA 95361 (209) 881-3523 Address of Principal Business Operations Telephone Number (Including Area Code) (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business Environmental Waste Management/Recycling Type of Business Organization other (please specify): limited partnership, already formed corporation business trust limited partnership, to be formed Month Year Actual of Estimated Date of Incorporation or Organization: 0 3 0 0 x Actual Estimated (Enter two-letter U.S. Postal Service Abbreviation for State: D E Jurisdiction of Incorporation or Organization: CN for Canada; FN for other foreign jurisdiction) **GENERAL INSTRUCTIONS** Federal: Who Must File. All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer, Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer X Director General and/or Managing Partner Full Name (Last name first, if individual) George Kanakis Business or Residence Address (Number and Street, City, State, Zip Code) 693 Hi Tech Parkway, Oakdale, CA 95361 X Director Beneficial Owner **Executive Officer** General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Andrea Viditta Business or Residence Address (Number and Street, City, State, Zip Code) 693 Hi Tech Parkway, Oakdale, CA 95361 Check Box(es) that Apply: Executive Officer Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Gary De Laurentiis Business or Residence Address (Number and Street, City, State, Zip Code) 693 Hi Tech Parkway, Oakdale, CA 95361 X Executive Officer Director Check Box(es) that Apply: Promoter Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) Fredrick Smith Business or Residence Address (Number and Street, City, State, Zip Code) 693 Hi Tech Parkway, Oakdale, CA 95361 Beneficial Owner **Executive Officer** X Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Jeffrey Chartier Business or Residence Address (Number and Street, City, State, Zip Code) 693 Hi Tech Parkway, Oakdale, CA 95361 **Executive Officer** Beneficial Owner Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Business or Residence Address (Number and Street, City, State, Zip Code)

|                   |                        |                       |                       | В. 1                                  | INFORMA'     | TION ABO                               | UT OFFEI                              | UNG                                   |              |   |                                       |                  |
|-------------------|------------------------|-----------------------|-----------------------|---------------------------------------|--------------|--|---------------------------------------|---------------------------------------|--------------|---|---------------------------------------|------------------|
| 1. Has th         | ne issuer sol          | d, or does th         | e issuer inte         | nd to sell, to                        | o non-accred | lited investo                          | rs in this of                         | fering?                               |              |   | Yes X                                 | No               |
|                   |                        | Ans                   | wer also in           | Annendix. (                           | Column 2. if | filing under                           | ULOE.                                 |                                       |              |   | L                                     | لـــا ل          |
| 2. What           | is the minin           |                       |                       |                                       |              | -                                      |                                       |                                       |              |   | \$0                                   | •                |
|                   |                        |                       |                       |                                       | , -          |  |                                       |                                       | •            | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Yes                                   | No               |
| 3. Does           | the offering           | permit joint          | ownership             | of a single u                         | mit?         | ····                                   |                                       |                                       |              |   |                                       | ן ו              |
|                   | _                      | - •                   | _                     | _                                     |              |  |                                       | rectly or ind                         |              |   |                                       |                  |
|                   |                        |                       |                       |                                       |              |  |                                       | n the offerin                         |              |   |                                       |                  |
|                   |                        |                       |                       |                                       |              |  |                                       | te or states, i                       |              |   | er or                                 |                  |
|                   |                        |                       |                       |                                       | ssociated pe | rsons of suc                           | h a broker o                          | τ dealer, you                         | u may set fo | rth the                                 |                                       |                  |
| <del></del>       | e (Last name           |                       | dealer only.          |                                       |              |  |                                       |                                       |              |   |                                       |                  |
| Fun Nam           | c (Last hailt          | z mst, n mu           | ividuai)              |                                       |              |  |                                       | •                                     |              |   |                                       |                  |
| •                 |                        |                       |                       |                                       |              |  |                                       |                                       |              |   |                                       |                  |
| Business          | or Residence           | Address (N            | lumber and            | Street, City.                         | State, Zip ( | Code)                                  |                                       | - "                                   |              |   |                                       |                  |
|                   |                        | •                     |                       | · · · · · · · · · · · · · · · · · · · | , , •        | ,                                      |                                       |                                       |              |   |                                       |                  |
|                   |                        |                       |                       | <del></del>                           |              |  | <u>.</u>                              | <del> </del>                          |              |   |                                       |                  |
| Name of           | Associated I           | Broker or De          | aler                  |                                       |              |  |                                       |                                       |              |   |                                       |                  |
|                   |                        |                       |                       |                                       |              |  |                                       |                                       |              |   |                                       |                  |
| 0. 4 . 7          | 10:1 D                 | T 177                 | 0.11.24.1             | •                                     | 0.11.11.10   | •                                      |                                       |                                       |              |   | ·                                     |                  |
|                   |                        |                       | s Solicited o         |                                       | Solicit Purc | nasers                                 |                                       |                                       | •            |   |                                       | • • •            |
| •                 |                        |                       | vidual States         | •                                     |              | ······································ | miei                                  | IDC1                                  | ret 1        |   | _                                     | 1 States         |
| [AL]<br>- [IL]    | [AK]<br>[IN]           | [AZ]<br>[IA]          | [AR]<br>[KS]          | [CA]<br>[KY]                          | [CO]<br>[LA] | [CT]<br>[ME]                           | [DE]<br>[MD]                          | [DC]<br>{MA]                          | [FL]<br>[MI] | [GA]<br>[MN]                            | [HI]<br>[MS]                          | [ID]<br>[MO]     |
| [MT]              | [NE]                   | [NV]                  | [NH]                  | [NJ]                                  | [NM]         | [NY]                                   | [NC]                                  | [ND]                                  | [OH]         | [OK]                                    | [OR]                                  | [PA]             |
| . [RI]            | [SC]                   | [SD]                  | [TN]                  | [TX]                                  | [UT]         | [VT]                                   | [VA]                                  | [WA]                                  | [WV]         | [WI]                                    | [WY]                                  | [PR]             |
| Full Name         | e (Last name           | first, if indi        | ividual)              |                                       |              |  |                                       |                                       |              |   |                                       |                  |
| di<br>M           |                        |                       |                       |                                       |              |  |                                       |                                       |              |   |                                       |                  |
| <u>É</u>          | a- Davidana            | Address (A            | in the said           | Chant City                            | State 7in C  | Pada)                                  | <del></del>                           |                                       |              | <del></del>                             |                                       |                  |
| Dusiness          | or Residence           | Aduress (N            | iumber and            | Sueer, City,                          | State, Zip C | Joue)                                  |                                       |                                       |              |   | ·                                     |                  |
|                   |                        |                       |                       |                                       |              |  |                                       |                                       |              |   |                                       |                  |
| Name of A         | Associated E           | Broker or De          | aler                  |                                       |              | · · · · · · · · · · · · · · · · · · ·  | · · · · · · · · · · · · · · · · · · · |                                       |              |   | · · · · · · · · · · · · · · · · · · · |                  |
|                   |                        |                       |                       |                                       |              |  |                                       |                                       |              |   |                                       |                  |
|                   |                        |                       |                       |                                       |              |  |                                       |                                       |              |   |                                       |                  |
| States in \       | Which Perso            | n Listed Has          | s Solicited o         | r Intends to                          | Solicit Purc | hasers                                 |                                       | •                                     |              |   |                                       |                  |
| (Check "A         | All States" of         | r check indi          | vidual States         | s)                                    |              |  |                                       | •••••                                 |              | ·····                                   |                                       | 1 States         |
| [AL]              | [AK]                   | [AZ]                  | [AR]                  | [CA]                                  | [CO]         | [CT]                                   | [DE]                                  | [DC]                                  | (FL)         | [GA]                                    | [HI]                                  | [ID]             |
| (IL)<br>(MT)      | [IN]<br>[NE]           | [IA]<br>[NV]          | [KS]<br>[NH]          | [KY]<br>[NJ]                          | [LA]<br>[NM] | [ME]<br>[NY]                           | [MD]<br>[NC]                          | [MA]<br>[ND]                          | [MI]         | [MN]                                    | [MS]                                  | [MO]<br>[PA]     |
| [RI]              | (SC)                   | [SD]                  | [TN]                  | [TX]                                  | [UT]         | . [VT]                                 | [VA]                                  | [WA]                                  | [OH]<br>[WV] | [OK]<br>[WI]                            | [OR]<br>[WY]                          | [PR]             |
|                   | (Last name             |                       |                       |                                       |              |  |                                       | ***                                   |              |   |                                       |                  |
|                   |                        |                       |                       |                                       |              |  |                                       |                                       |              |   |                                       |                  |
|                   |                        |                       |                       |                                       |              |  |                                       |                                       |              |   |                                       |                  |
| Business          | or Residence           | Address (N            | lumber and            | Street, City,                         | State, Zip C | Code)                                  |                                       |                                       |              |   |                                       |                  |
|                   |                        |                       |                       |                                       |              |  |                                       |                                       |              |   |                                       |                  |
| <u> </u>          |                        |                       |                       | <del></del>                           |              |  |                                       |                                       |              |   |                                       |                  |
| Name of A         | Associated E           | sroker or De          | aler                  |                                       |              |  |                                       |                                       |              |   |                                       |                  |
| Canton in V       | Milah Dama             | n Time d TYes         | Caliaina a            |                                       | Calinia Dana | <u> </u>                               |                                       |                                       |              |   |                                       |                  |
|                   |                        |                       | s Solicited o         |                                       | Soncil Purc  | Dasers                                 |                                       |                                       |              |   | <b></b>                               | 1.0.             |
| (Check "A<br>[AL] | All States" of<br>[AK] | r check indiv<br>[AZ] | vidual States<br>[AR] | s)<br>[CA]                            | [CO]         | <br>                                   | (DE)                                  | ויייייייייייייייייייייייייייייייייייי | [FL]         | [GA]                                    | A1<br>[HI]                            | l States<br>[ID] |
| [IL]              | [IN]                   | [IA]                  | [KS]                  | [KY]                                  | [LA]         | [CT]<br>[ME]                           | [DE]<br>{MD}                          | [DC]<br>[MA]                          | [FL]         | [MN]                                    | [MS]                                  | [MO]             |
| [MT]              | [NE]                   | [NV]                  | [NH]                  | [NJ]                                  | [NM]         | [NY]                                   | [NC]                                  | [ND]                                  | [OH]         | [OK]                                    | [OR]                                  | [PA]             |
| [RI]              | (SC)                   | [SD]                  | [TN]                  | [TX]                                  | jurj         | [TV]                                   | [VA]                                  | [WA]                                  | [WV]         | [wi]                                    | (WY)                                  | [PR]             |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)



| 1 <b>.</b><br>: | Enter the aggregate price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is at exchange offering, check this box and indicate in the columns below the  | 1                           |   |                               |
|-----------------|---|-----------------------------|---|-------------------------------|
| 1               | amounts of the securities offered for exchange and already exchanged.  Type of Security   | Aggregate<br>Offering Price | _ | Amount Already<br>Sold        |
|                 | Debt  | \$0                         | • | \$0                           |
|                 | Equity  | \$                          |   | \$                            |
|                 | Common X Preferred  | \$1,878,860                 | — | \$1,878,860                   |
|                 |   | \$0                         |   | \$0                           |
|                 | Partnership Interests   | \$0                         |   | \$0                           |
|                 | Other (Specify)   | \$0                         |   | \$0                           |
|                 | Total   | \$1,878,860                 |   | \$1,878,860                   |
|                 | Answer also in Appendix, Column 3, if filing under ULOE.  | \$1,076,000                 |   | \$1,676,600                   |
|                 | securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amounts of their purchases on the total lines. Enter "0" if answer is "none" or "zero."  | 1                           |   | Aggregate                     |
| 1               |   | Number<br>Investors         |   | Dollar Amount<br>of Purchases |
|                 | Accredited Investors  | 7                           |   | \$1,731,762                   |
|                 | Non-accredited Investors  | 3                           |   | \$147,098                     |
|                 | Total (for filings under Rule 504 only)   | N/A                         |   | \$ 0                          |
| ١.              | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.  |                             |   | · .                           |
|                 |   | Type of                     |   | Dollar Amount                 |
|                 | Type of offering  | Security                    |   | Sold                          |
|                 | Rule 505  | N/A                         |   | \$0                           |
|                 | Regulation A  | N/A                         |   | \$0                           |
|                 | Rule 504  | N/A                         |   | \$0                           |
| :<br>:<br>: -   | Total   | N/A                         |   | \$0                           |
| l.              | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | !<br>!                      |   |                               |
|                 | Transfer Agent's Fees   | *****                       |   | \$1,000                       |
|                 | Printing and Engraving Costs  |                             |   | \$0                           |
|                 | Legal Fees  |                             |   | \$500                         |
|                 | Accounting Fees   | *******                     |   | \$0                           |
|                 | Engineering Fees  |                             |   | \$0                           |
|                 | Sales Commissions (specify finders' fees separately)  |                             |   | \$0                           |
|                 | Other Expenses (identify) Blue Sky Fling Fees   |                             |   | \$1,969.37                    |
|                 | Total   |                             |   | \$3,46937                     |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Sport

|      | C. OFFERING PRICE, NUMBER OF INVESTORS, EXPER   | NSE:          | S AND USE OF P   | ROC         | EEDS  |     |
|------|---|---------------|--|-------------|---|-----|
|      | b. Enter the difference between the aggregate offering price given in response to Question 1 and total expenses furnished in response to Part C - Question 4.a difference is the "adjusted gross proceeds to the issuer."   | ı. 7          | This   | :           | \$0<br>No cash to<br>issuer;<br>Cancellation of<br>Debt |     |
| 5.   | Indicate below the amount of the adjusted gross proceeds to the issuer used or propoused for each of the purposes shown. If the amount for any purpose is not known, estimate and check the box to the left of the estimate. The total of payments listed in the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.6 | furni<br>nust | sh an<br>equal   |             |   |     |
| 1.   |   |               | Payments to<br>Officers,<br>Directors, &<br>Affiliates |             | Payments To Others                                      |     |
| Se   | Salaries and fees   | $\boxtimes$   | \$0  | $\boxtimes$ | \$ 0  |     |
|      | Purchase of real estate   | $\boxtimes$   | \$0  |             | \$ 0  |     |
|      | Purchase, rental or leasing and installation of machinery and equipment   | $\boxtimes$   | \$0  | $\boxtimes$ | \$0   |     |
|      | Construction or leasing of plant buildings and facilities   | $\boxtimes$   | \$0  | $\boxtimes$ | \$0   |     |
|      | Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)  | M             | \$0  | ⊠           | \$ 0  |     |
|      | Repayment of indebtedness   |               |  |             | \$ 0  |     |
|      | Working capital   | _             |  | $\boxtimes$ | \$0   |     |
|      | Other (specify): Cancellation of \$1,878,860 in debt of Issuer  | _             |  | _           |   |     |
|      |   | $\boxtimes$   |  | $\boxtimes$ | \$0   | •   |
|      | Column Totals   | $\boxtimes$   | \$0  | $\boxtimes$ | \$0   |     |
|      | Total Payments Listed (column totals added)   |               |  | ₫ :         | <u>60</u>   |     |
|      | D. FEDERAL SIGNATURE  |               |  |             |   |     |
| sign | e issuer has duly caused this notice to be signed by the undersigned duly authorized prature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exprenation furnished by the issuer to any non-accredited investor pursuant to paragraph (  | xcha          | nge Commission,  |             |   |     |
| Itec | er (Print or Type) Enviornmental Group, Inc.  Signature  Con  Con  Con  Con  Con  Con  Con  Co  | ر م           | A  |             | Date<br>November 1, 2                                   | 004 |
|      | ne of Signer (Print or Type)  Title of Signer (Print or Type)  y De Laurentiis  Title of Signer (Print or Type)  President and CEO  |               |  |             |   |     |

## ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

|    |  | E. STATE SIGNATURE  |                   |            |            |
|----|--|---|-------------------|------------|------------|
| 1. | Is any party described in 17 CFR 230.252(c), (d), (e) of such rule?                                      | or (f) presently subject to any of the disqualification provi   | sions             | Yes        | No<br>⊠    |
|    | See  | Appendix, Column 5, for state response.   |                   |            |            |
| 2. | The undersigned issuer hereby undertakes to furni<br>(17 CFR 239.500) at such times as required by state | sh to any state administrator of any state in which this r<br>law.  | notice is filed,  | a notice o | n Form D   |
| 3. | The undersigned issuer hereby undertakes to furni offerees.  | sh to the state administrators, upon written request, info  | rmation furnish   | ed by the  | issuer to  |
| 4. |  | s familiar with the conditions that must be satisfied to be<br>is notice is filed and understands that the issuer claiming the<br>been satisfied. |                   |            |            |
|    | e issuer has read this notification and knows the content<br>horized person.                             | ats to be true and has duly caused this notice to be signed or  | n its behalf by t | he unders  | igned duly |
|    | ner (Print or Type)<br>E Enviornmental Group, Inc.   | Signature   | Date<br>Novemb    | er 1, 2004 | +          |
|    | ne (Print or Type)<br>ry De Laurentiis   | Title (Print or Type) President and CEO   |                   |            |            |

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

### APPENDIX

| 1     | 2   |    | 3                                      | 5                                    |   |  |        |     |  |
|-------|---|----|--|--------------------------------------|---|--|--------|-----|--|
|       | Intend to sell to non-accredited investors in State (Part B-Item 1)  Type of security and aggregate offering price offered in state (Part C-Item 1) |    |  |                                      | Disqualification<br>under State ULOE<br>(if yes, attach<br>explanation of<br>waiver granted)<br>(Part E-Item 1) |  |        |     |  |
| State | Yes   | No |  | Number of<br>Accredited<br>Investors | Amount  | Number of<br>Non-Accredited<br>Investors | Amount | Yes | No   |
| AL    |   |    |  |                                      |   |  | ··     |     |  |
| AK    |   |    |  |                                      |   |  |        |     |  |
| AZ    |   |    |  |                                      |   |  |        |     |  |
| AR    |   |    |  |                                      |   |  |        |     |  |
| CA    | ,   | x  | Common Stock \$808,393.20              | 2                                    | \$808,393.20  | 0  | \$0    |     | x  |
| ÇO    | <u> </u>  |    | ###################################### |                                      | 71894.00  |  |        |     |  |
| CT    |   |    |  |                                      |   |  |        |     |  |
| DE    |   |    |  |                                      |   |  |        |     | <del> </del>                                     |
| DC    |   |    |  |                                      |   |  |        |     |  |
| FL    |   |    |  |                                      |   |  |        |     | <del>                                     </del> |
| GA    |   |    |  |                                      |   |  |        | ļ   |  |
| НІ    |   |    |  |                                      |   |  |        |     | 1  |
| ID    |   |    |  |                                      |   |  |        |     |  |
| ΙL    |   |    |  |                                      |   |  |        |     | 1  |
| IN    |   |    |  |                                      |   |  | -      |     |  |
| IA    |   |    |  |                                      |   |  | •      |     |  |
| KS    |   |    |  |                                      |   |  |        |     |  |
| KY    |   |    |  |                                      |   |  |        |     |  |
| LA    | -   |    |  |                                      |   |  |        |     |  |
| ME    |   |    |  |                                      |   |  |        |     |  |
| MD    |   |    |  |                                      |   |  |        |     |  |
| MA    |   |    |  |                                      |   |  |        |     |  |
| MI    |   |    |  |                                      |   |  |        |     |  |
| MN    |   |    |  |                                      |   |  |        |     |  |
| MS    |   |    |  |                                      |   |  |        |     |  |
| Μ̈́O  |   |    | _                                      |                                      |   |  |        |     |  |
| МТ    |   |    |  |                                      |   |  |        |     |  |



# APPENDIX

| 1     | 2   |    | 3                            | T                                    | 5   |  |        |     |    |
|-------|---|----|------------------------------|--------------------------------------|---|--|--------|-----|----|
|       | Intend to sell to non-accredited investors in State (Part B-Item 1)  Type of security and aggregate offering price offered in state (Part C-Item 1) |    |                              |                                      | Disqualification<br>under State ULOE<br>(if yes, attach<br>explanation of<br>waiver granted)<br>(Part E-Item 1) |  |        |     |    |
| State | Yes   | No | ,                            | Number of<br>Accredited<br>Investors | Amount  | Number of<br>Non-Accredited<br>Investors | Amount | Yes | No |
| ·NE   |   |    |                              |                                      |   |  |        |     |    |
| NV    |   |    |                              |                                      |   |  |        |     |    |
| NH    |   |    |                              |                                      |   |  |        |     |    |
| NJ    |   |    |                              |                                      |   |  |        |     |    |
| NM    |   |    |                              |                                      |   |  |        |     |    |
| NY    |   | х  | Common Stock<br>\$900,000.00 | 4                                    | \$900,000.00  | 0  | \$0    |     | х  |
| NC    |   |    |                              |                                      |   |  |        |     |    |
| ND    |   |    |                              |                                      | ,   |  |        |     |    |
| ОН    |   | х  | Common Stock<br>\$23,369.07  | 1                                    | \$23,369.07   | 0  | \$0    |     | х  |
| ОК    |   |    |                              |                                      |   |  |        |     |    |
| OR    | х   |    | Common Stock<br>\$61,684.00  | 2                                    | \$61,684.00   | 0  | \$0    |     | х  |
| PA    |   |    |                              |                                      |   |  |        |     |    |
| RI    |   |    |                              |                                      |   |  |        |     |    |
| sc    |   |    |                              |                                      |   |  |        |     |    |
| SD    |   |    |                              |                                      |   |  |        |     |    |
| TN    |   |    |                              |                                      |   |  |        |     |    |
| тх    |   |    |                              |                                      |   |  |        |     |    |
| UT    |   |    |                              |                                      |   |  |        |     |    |
| _VT   |   |    |                              |                                      |   |  |        |     |    |
| VA    | x   |    | Common Stock<br>\$85,414.80  | 1                                    | \$85,414.80   | 0  | \$0    |     | х  |
| WA    |   |    |                              |                                      |   |  |        |     |    |
| wv    |   |    |                              |                                      |   |  |        |     |    |
| WI    |   |    |                              |                                      |   |  |        |     |    |
| WY    |   |    |                              |                                      |   |  |        |     |    |
| PR    |   |    |                              |                                      |   |  |        |     |    |

